

ARIZONA DEPARTMENT OF HEALTH SERVICES

STATE OF ARIZONA

County Of Maricopa

} ss

CERTIFICATE NO. -32-

DOCKET NO. EMS 2764

THE ARIZONA DEPARTMENT OF HEALTH SERVICES has found, under the authority of A.R.S. §36-2232 et seq. and pursuant to Department of Health Services rules, that public necessity requires the operation of

CITY OF DOUGLAS dba CITY OF DOUGLAS AMBULANCE SERVICE

as a ground ambulance service in the State of Arizona for the transportation of individuals who are sick, injured, wounded or otherwise incapacitated or helpless within the following service area, with the following central operations station and response times:

1. Service area: The City of Douglas, Arizona, and the following general boundaries: On the South, the U.S./Mexico border extending from the New Mexico State Line to approximately twelve (12) miles West of Douglas; on the East, the Arizona/New Mexico State Line extending from the Mexico border to approximately fifty-five (55) miles North to Portal, Arizona; on the North, six (6) miles South of Davis Road on the Central Highway, then East twelve (12) miles to Leslie Canyon Road, then North to Hill Top area, then east to the New Mexico State Line; on the West, from the U.S./Mexico border extending North along the Central Highway to six (6) miles south of Davis Road.
2. Central Operations Station: Douglas, Arizona (1400 10th Street)
3. Response Times:
 - a. Three (3) minutes on seventy-five (75) percent of all calls.
 - b. Ten (10) minutes on ninety-five (95) percent of all calls.
 - c. Twenty (20) minutes on one hundred (100) percent of all calls.

Now, therefore, by virtue of the authority vested in the Arizona Department of Health Services, under the constitution and laws of the State of Arizona, does hereby grant this

AMENDED

CERTIFICATE OF NECESSITY

authorizing the operation of the aforesaid ambulance service for a period ending January 31, 2007 unless for cause sooner amended, suspended, revoked or terminated subject to the decisions and orders, and rules of the Department.

PROVIDED, that this certificate shall not be assigned nor transferred unless authorized by the Arizona Department of Health Services.



BY THE ORDER OF THE ARIZONA DEPARTMENT OF HEALTH SERVICES, IN

WITNESS WHEREOF, I CATHERINE R. EDEN
the Director of the Arizona Department of Health Services, have hereunto set my hand and caused the official seal of the Arizona Department of Health Services to be affixed at Phoenix, Arizona on 3/2/04

Judi Creme for
DIRECTOR

TO BE FRAMED AND DISPLAYED IN A CONSPICUOUS PLACE

ARIZONA DEPARTMENT OF HEALTH SERVICES

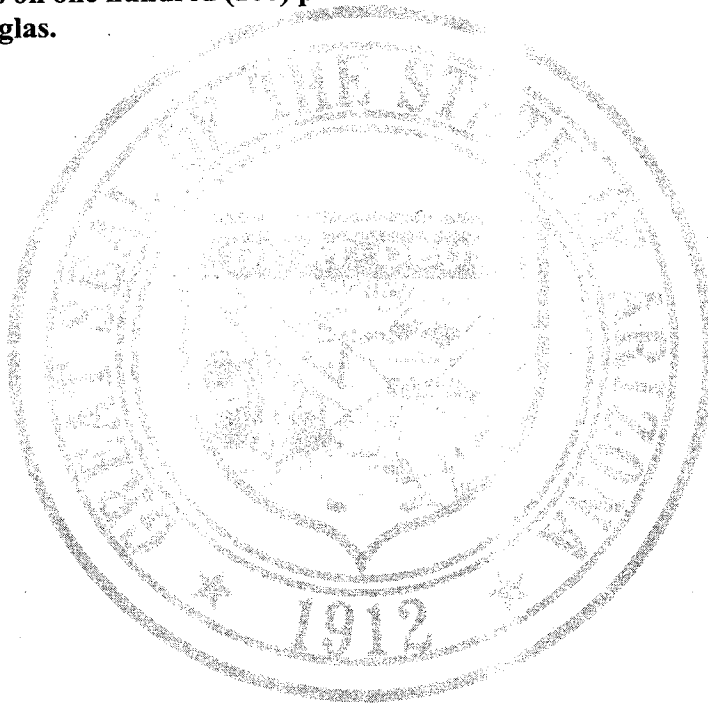
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3. Response Times (cont.):

Exceptions to "c.":

1. Sixty (60) minutes on one hundred (100) percent of all calls to the Portal area and Rucker Canyon area.
2. Sixty (60) minutes on one hundred (100) percent of all calls on all areas over thirty (30) miles East of Douglas.



CERTIFICATE OF NECESSITY

(CONTINUATION PAGE ONE)

ISSUED 3/2/04
EXPIRES January 31, 2007

Judi Crume
DIRECTOR